

**REMARKS/ARGUMENTS**

Applicants have received and carefully reviewed the Office Action of the Examiner mailed January 17, 2006. Claims 1-29 remain pending. Reconsideration and reexamination are respectfully requested.

**Rejection under 35 U.S.C. § 102(e)**

Claims 1-15 and 27-28 are rejected as being anticipated by Westerkamp et al. (U.S. 2002/0026328). In response to the previous amendment and Applicants' arguments, the Examiner asserts that Westerkamp's teaching of a report being generated to ensure that all information was entered for the record is deemed equivalent to determining unacceptable activity parameters as the lack of information in the record would be an unacceptable parameter for the patient record system. Applicants respectfully disagree. Westerkamp teaches, in paragraph [0081], the generation of a control report listing which, in part, lists any types of patient information that has not yet been received. See FIG. 4b. Westerkamp teaches that "[i]f necessary, the centralized manager contacts the healthcare provider 38 or the patient/payor 36 to obtain any missing information." See paragraph [0081]. Westerkamp thus appears to teach creating a report that lists patient information that is missing, if any. Applicants submit that such steps are not equivalent to the claimed method step of "providing a database, each of the number of representatives recording his/her activities in the database", or "providing a number of reports, each report defining a number of unacceptable activity parameters", as recited in claim 1.

Note that claim 1 relates to a method for providing supervision over the activities of a number of representatives of a business. The method includes the step of providing a database, wherein each of the number of representatives records his/her activities in the database. The data entry operator of Westerkamp does not appear to be a representative of the business, as that term is used in the present specification, and more particularly, the data entry operator of Westerkamp does not appear to be recording his/her activities in the database. Instead, the data entry operators of Westerkamp appear to be entering data related to third parties (i.e. patient data),

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which is wholly unrelated to the activities of the data entry operators.

In addition, Westerkamp do not appear to teach the missing information in the reports as unacceptable, but merely missing. Westerkamp provides an alert for the user to make an attempt to obtain the missing information. Applicants submit that one of ordinary skill in the art would not interpret a list of missing information in the reports of Westerkamp as unacceptable activity parameters, as is recited in the claims.

Additionally, Westerkamp do not appear to teach the claimed steps of

running the number of reports against the database, each report checking the recorded activities of each representative against the number of unacceptable activity parameters defined in the report; and

providing a listing of alerts for only those activities in the database that fall within the unacceptable activity parameters defined in the number of reports

as is recited in claim 1. The Examiner asserts that Westerkamp's teaching of alerts that indicate that insufficient information has been entered is deemed equivalent to an alert related to activities of representatives against unacceptable activity parameters since the alert is indicating an unacceptable condition of the information entered by the operator. Applicants respectfully disagree. As stated above, Westerkamp appears to teach providing a list of missing patient information. There is no indication that the missing information is due to an unacceptable activity by the operator. Applicants submit that one of ordinary skill in the art would understand that the missing information in patient records taught by Westerkamp could be caused by numerous factors such as the patient not knowing the correct information, choosing not to divulge the information, or not being asked the right questions, or a medical staff person not asking the appropriate questions or not recording the information, and that none of these reasons for the missing information would be considered unacceptable activity parameters of an operator.

Regarding claim 2, the Examiner asserts that because Westerkamp's system is a method to manage the patient account life cycle, it would be deemed necessary to have the ability to make changes to the parameters of the reports in order to facilitate the management of it.

Applicants submit that Westerkamp does not teach or suggest a method in which the number of

unacceptable activity parameters can be changed by a user or representative, as is recited in the claim. The Examiner previously asserted that Westerkamp's teaching of creating a list of missing information anticipates the claimed step of providing a number of reports, each report defining a number of unacceptable activity parameters. Applicants submit that based on such an assumption, Westerkamp cannot be deemed to teach changing the number of unacceptable activity parameters by the user or representative because he or she would not have control over the number of missing items in the report. There does not appear to be any way for a user of Westerkamp's method to change the number of missing items in the report, thus Westerkamp cannot be deemed to anticipate claim 2.

Regarding claim 5, the Examiner asserts that Westerkamp's teaching of a control report being run once a flashpoint is completed anticipates the claimed method step of running selected reports against the database when a representative performs a predetermined function. Applicants respectfully disagree. Westerkamp states that a "flashpoint is a defined point in time in the patient account lifecycle with a specific purpose that provides an optimum opportunity for management of the patient account." Emphasis added; see page 3, paragraph [0044]. Applicants submit that the claimed step of running a selected report when a representative performs a predetermined function is not anticipated by Westerkamp's running selected reports at defined points in time.

The Examiner asserts that Westerkamp's teaching of including a set of standards as part of the performance measures for days to bill, etc., anticipates claim 10, and the teaching of marking the end of the patient contact phase once an alert is viewed as anticipating claim 11. Applicants respectfully disagree. Claim 10 recites the step of providing compliance related materials to a user, and claim 11 recites the step of recording when the user views or accesses the compliance related materials. Applicants submit that one of ordinary skill in the art would not consider the standards relating to performance measures for the desired number of days between when the patient is discharged and when the claim should be filed with the payer, as taught by Westerkamp, as being equivalent to the claimed compliance related materials recited in claim 10. Additionally Westerkamp does not appear to teach or suggest a step of recording when a user

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views or accesses compliance records.

Regarding independent claim 13, the Examiner asserts that Westerkamp teaches the step of providing a listing of alerts for only those activities in the database that fall outside of the acceptable activity parameters defined in the number of reports because anything that is outside the acceptable area is within the unacceptable area. As stated above, Westerkamp does not appear to teach providing a database, wherein each of the number of representatives records his/her activities in the database. Further, Westerkamp does not appear to define unacceptable activity parameters, and in particular, activity parameters that relate to the recorded activities of each representative. Moreover, Westerkamp does not appear to teach or suggest providing a listing of alerts for only activities falling outside acceptable activity parameters, as is recited in claim 13.

The Examiner asserts, in the Arguments section, that if acceptable parameters are being measured, it would be obvious to also measure its antithesis. As stated above, Westerkamp does not appear to define unacceptable activity parameters, as is recited in claim 1. Applicants submit that the missing information in patient records taught by Westerkamp is not equivalent to the unacceptable activity parameters recited in the claims. Further, the provided patient information cannot be seen to anticipate an acceptable activity parameter as is recited in the claims.

Additionally, even if one were to consider the provided patient information as an acceptable activity parameter, Westerkamp does not appear to teach running reports checking the recorded activities of representatives against acceptable activity parameters and providing a listing of alerts for those activities that fall outside of the acceptable activity parameters. The provided patient information in the method of Westerkamp is not related to an activity of a representative, rather it appears to be patient data. Also, because the asserted acceptable activities of Westerkamp are merely the inclusion of the desired patient information, it is unclear what would be considered to fall outside such a parameter. Westerkamp thus does not appear to teach each and every element of independent claim 13 or the claims dependent thereon.

With regard to independent claims 14 and 27, the Examiner again asserts that the information contained in the patient files is a record of the operator's activities. However, under

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such an interpretation, Westerkamp does not appear to teach the method steps recited in claims 14 and 27. If the simple act of entering some of the provided patient information is considered an acceptable activity by an operator, the antithesis, or unacceptable activity, following the Examiner's reasoning, would be an operator not entering information that was provided. Westerkamp does not teach any means of tracking or determining a situation where patient information was provided, but the operator did not enter it into the system. Additionally, as discussed above with respect to claim 2, Westerkamp does not appear to teach determining which unacceptable activity parameters can be changed by the supervisor, and generating a report including the one or more unacceptable activity parameters including one or more of the changeable activity parameters. Similarly, if the act of entering patient information is considered an acceptable activity parameter, Westerkamp do not appear to teach or suggest determining which acceptable activity parameters can be changed by the supervisor. There does not appear to be any reason for changing the operator's act of entering the required information. Westerkamp thus does not teach or suggest each and every element of independent claims 14 or 27, or the claims dependent thereon.

MPEP 2131 states that, in order to anticipate a claim, "[t]he identical invention must be shown in as complete detail as is contained in the ... claim." *Richardson v. Suzuki Motor Co.*, 868 F.2d 1226, 1236, 9 USPQ2d 1913, 1920 (Fed. Cir. 1989)." Applicants submit that Westerkamp does not appear to teach each and every step of the claimed methods in as complete detail as is contained in the claims. Additionally, there is no motivation for one of ordinary skill in the art to modify the methods of Westerkamp to achieve the claimed methods. Reconsideration and withdrawal of the rejection is respectfully requested.

Additionally, in the Response to Amendments section starting on page 2 of the office action, the Examiner makes various assertions that it would have been obvious to one of ordinary skill in the art to measure acceptable as well as unacceptable parameters. Thus, it appears that the Examiner is acknowledging that Westerkamp et al. do not actually teach each and every claimed method step, but rather asserts that doing so would have been obvious. Applicants submit that such assertions support the argument that Westerkamp do not teach each and every

element of the claims, as is required for anticipation. Reconsideration and withdrawal of the rejection is respectfully requested.

**Rejection under 35 U.S.C. § 103**

Claims 16-26 and 29 are rejected as being unpatentable over Westerkamp et al. in view of LaFore et al. (US 2002/0032640). The Examiner asserts that it would have been obvious to modify the database system as taught by Westerkamp to include the financial and broker features of LaFore et al. to provide a more inclusive database system for customer information. Applicants respectfully traverse the rejection.

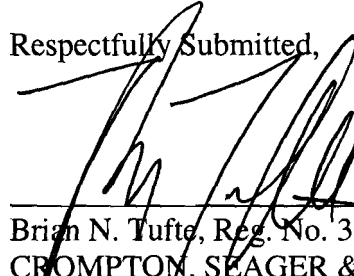
As stated above, Westerkamp et al. fail to teach the basic elements of the claimed method. LaFore et al. do not appear to teach what Westerkamp et al. lacks. Additionally, there is no motivation for one of ordinary skill in the art to add financial and broker information to the healthcare patient information database system of Westerkamp because the two types of information are not related and do not appear to have any use if combined. MPEP 2143.01 (III) states that "[t]he mere fact that references can be combined or modified does not render the resultant combination obvious unless the prior art also suggests the desirability of the combination. *In re Mills*, 916 F.2d 680, 16 USPQ2d 1430 (Fed. Cir. 1990)." Applicants submit that the only motivation, suggestion, or guidance for combining the teachings of Westerkamp and LaFore comes from the instant specification, which is improper.

Further, even if one were to combine the teachings of Westerkamp et al. with LaFore et al., one would not arrive at the claimed method. LaFore et al. do not appear to teach a method and system in which representatives are brokers who record their activities, and for example, where those activities are trades made on behalf of a client/customer. Thus, any combination of Westerkamp et al. and LaFore et al. cannot teach or suggest each and every element of the rejected claims. Withdrawal of the rejection is respectfully requested.

Reconsideration and reexamination are respectfully requested. It is submitted that, in light of the above remarks, all pending claims 1-29 are now in condition for allowance. If a telephone interview would be of assistance, please contact the undersigned attorney at 612-359-9348.

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Respectfully Submitted,



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